

# NSLS Contractor / Vendor Orientation Form

*For Contractors or Vendors sponsored by the NSLS Department*

**Instructions:** NSLS Contact and Training Coordinator to indicate required training. Contractor to collect signatures as training is done. Send completed form to Eileen Morello (NSLS Guest Administrator), 725B. Rev. 112601

Contractor Employee Name: \_\_\_\_\_ BNL ID Number: \_\_\_\_\_

Employer/Company Name: \_\_\_\_\_ Start Date: \_\_\_\_\_

NSLS Contact: \_\_\_\_\_ Contact's Phone Number: \_\_\_\_\_

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## NSLS Contact complete this part

# Days Contractor Expected to be on Site: \_\_\_\_\_

Will Contractor need access to any Radiologically Controlled Areas? ☐ NO ☐ YES

If YES, NSLS Contact must initial one of the options below:

\_\_\_\_\_ Contractor will be in a Controlled Area for less than 8 (eight) hours AND will be continuously escorted by trained, badged personnel. Visitor/Escort sign-in sheets at entrances to Controlled Areas will be used. NSLS Contact is responsible for arranging escort.

\_\_\_\_\_ Contractor needs unescorted access to Controlled Areas, or access for more than 8 hours. RADIOLOGICAL TRAINING AND TLD ARE REQUIRED in PART D below.

NSLS Contact	Date	NSLS Training Coordinator	Date
A. Contractor/Vendor ID badge application <input type="checkbox"/> Obtain from Eileen Morello, Rm. 2-104, x2145 <input type="checkbox"/> Not required ( <i>no more than 3 days on site</i> )		Signature	Date
B. Contractor/Vendor Safety Orientation ( <i>2 hrs</i> ) <input type="checkbox"/> Attend class any day (M-F) 8:30 am, bldg 422 and get ID card made by showing application form. <input type="checkbox"/> Not required ( <i>no more than 3 days on site</i> )		Instructor Signature	Date
C. NSLS ESH Briefing for Contractors/Vendors ( <i>20 min.</i> ) <input type="checkbox"/> See E. Morello or User Office to schedule appt. <input type="checkbox"/> Not required ( <i>no more than 3 days on site AND escorted</i> )		Instructor Signature	Date
D. Radiological Training <input type="checkbox"/> None ( <i>no Controlled Areas, or escorted for less than 8 hrs.</i> ) <input type="checkbox"/> GERT ( <i>Mon or Thurs 3:00 to 4:15, bldg. 703</i> ) <input type="checkbox"/> NSLS Radiological Access Module ( <i>ONLY if on site for no more than 60 days</i> ) Schedule Module with Training Coordinator or User Office; can also be done on Web prior to arrival.		Instructor Signature	Date

If ID badge was issued and all training required in Parts B through D has been completed, then go to User Administration Office to get a temporary radiation badge and photo ID card encoded for access.

E. Other Location Training <input type="checkbox"/> ATF (Accelerator Test Facility) - ATF BLOSA <input type="checkbox"/> SDL (Source Development Lab) - SDL ESH Briefing <input type="checkbox"/> NSLS Beamline BLOSA <input type="checkbox"/> None required		Instructor Signature	Date
F. Environmental Aspects Involved <input type="checkbox"/> None. <input type="checkbox"/> Yes – Training required: _____		Training Coordinator Signature	Date
G. Other ESH Training Required? <input type="checkbox"/> No <input type="checkbox"/> Yes – specify: _____		Training Coordinator Signature	Date

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